

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W	753P	09-13-00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A.S	373	10-24-00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	N
11	N
12	N
13	N
14	N
15	N
16	N
17	N
18	N
19	N
20	N
21	N
22	N
23	✓
24	✓
25	✓
26	N
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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